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NURSING AMONG DEEP-SEA FISHERMEN

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"THE Royal National Mission to Deep-Sea Fishermen of England," in spite of its cumbrous and unwieldy title, has achieved some measure of success in a field of labor in which, if anywhere in the world, things clumsy and unwieldy are at a discount.

The Mission's object is described on the port and starboard bows of its thirteen sailing- and steam-ships as being to "Heal the Sick" and "Preach the Gospel." I use the singular, for in its peculiar fields of labor these terms are practically synonymous.

The first hospital ship for the benefit of deep-sea fishermen was launched in 1889. She was intended to further the Kingdom of God on earth among those vikings of to-day exposed by their perilous calling to almost every physical danger, and to extend some of the blessings of civilization in their times of need. Like almost every errand of mercy undertaken in the old country during the last century, the Mission received not only the personal sympathy and monetary support of Queen Victoria, but the vessel received her name and personal inspection. The success of the enterprise soon caused this small floating hospital to be followed by a consort called the *Albert*, and later by a third and fourth boat of similar type. They were ketch-rigged vessels of one hundred to one hundred and fifty tons burden, British oak hulls, copper-fastened, teak-decked, and iron hatches, to enable them to meet with impunity the devastating "nor'easters" of the German Ocean.

These large British fisheries are carried on by fleets of sailing-smacks under a fishing admiral, and were permanent institutions at sea all the year round, only now and again one vessel coming out from home as another returned to refit for a fresh voyage. The lives of these men were spent out of sight of land.

About 1890 fishing owners began to realize that fish were growing scarce on the grounds near home, and that delays, caused by calms or head winds, to sailing-vessels on their way to and from the fleets were making them unremunerative.

The small, fast steamer, which carried the daily catch from the fleet to the market, caught as much fish in one night as the sailing-vessels in three. The owners therefore made experiments with steam trawlers, which proved so remunerative that a revolution almost broke out, and the once dainty and picturesque sailing-fleets were gradually replaced by grimy but ever-busy steamers. To keep pace with the change, the Mission was forced to alter its policy, and in 1900 the steam hospital trawler Alpha was launched. Like most of the Mission's vessels, she helped to defray her heavy current expenses by sharing in the labors of the fishery with those she was stationed among. Since then two more hospital steamers have been added in the home waters.

Only on rare occasions, and then for very brief periods, has the nursing on these vessels been undertaken by women. The reason was by no means for lack of volunteers, but simply the exigencies of the work.

The in-patients are never kept longer than absolutely necessary, being transferred to shore hospitals at the earliest opportunity. The fishing-fleets are seldom more than three- or four-days' journey from the land, except on the Icelandic grounds, and there fleeting has not been found sufficiently remunerative to make the fleet a permanency.

The nurse on board has always been either the doctor himself or a male attendant, signed on the articles as "hospital hand," but who is at all calls—a veritable handy man.

As our clientèle is exclusive of women and children, as span space on the vessel is as valuable as gold, and as span accommodation for nurses materially increased the difficulties of the problem of how to get necessities into the space, and it is not consistent with her office as a fishing-boat to indefinitely enlarge the vessel, it has been found best to employ male hands for hospital assistants. It is only fair to say of these men of the sea that though large of limb and clumsy of gait on the land, they can be as gentle and deft as women when afloat.

In 1892 a sum of money was offered the Mission to extend its efforts for the benefit of fishermen across the Atlantic, and the Albert was dispatched to the coast of Labrador with a medical officer on board.

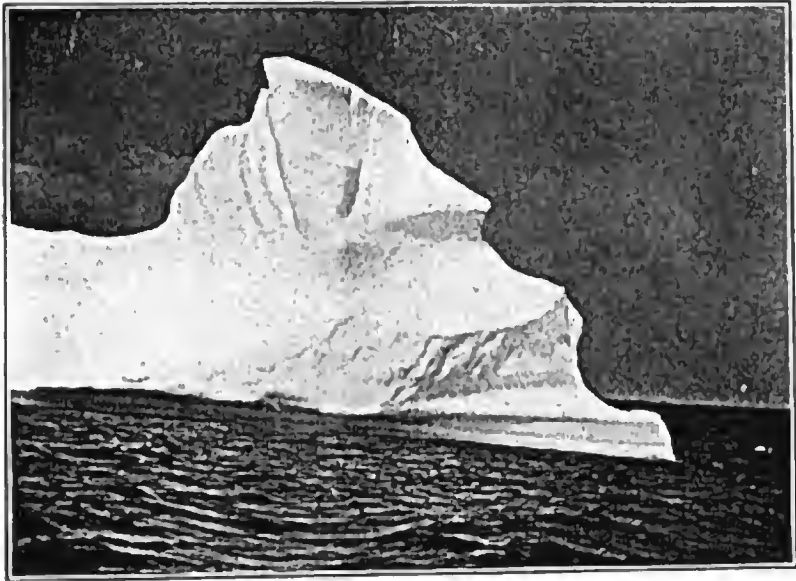
The fishing there extends over a coast-line of about one thousand miles. The fisher-folk are mostly Newfoundlanders, who every spring swarm to the coast in every imaginable kind of craft. Men, women, children, nets, boats, salt, barrels of beef, pork, flour, molasses, goats, fowls, dogs, and such like are huddled together in indescribable confusion in the



MISSION HOSPITAL STEAMER STRATHCONA WITH BOATS ALONGSIDE FOR MEDICINE,
NEWS, ETC. TAKEN AUGUST, 1901



SOUTHERN ESKIMOS ON THE HOSPITAL STEAMER STRATHCONA



A HOSPITAL VISITOR, AUGUST, 1901



BESSIE AND FREDDIE BLAKE. TAKEN AT ENFIELD, N. H. TWO ORPHAN CHILDREN
SENT TO NEW HAMPSHIRE

holds and cabins. The people would total up to some thirty thousand, inclusive of a few Nova Scotians and of an occasional Gloucester banker working the great halibut banks off the east coast, and which is driven to seek shelter or medical assistance. These, with the scattered residents, numbering some four thousand whites and fifteen hundred Esquimaux, form the quota on which we practise.

The first cruise revealed to us the fact that the different conditions of this fishery involved at least one shore hospital to relieve the congested cabins of the ship and enable her to be free enough to cover so large a coast-line in any efficient manner and in any adequate way cope with the serious cases. Thus, this first year a localized epidemic of diphtheria, which caused twenty-seven deaths, received no attention at all, it having, as it were, burned itself out before it was even heard of by the hospital ship, which was delayed on another section of the coast. To be more exact, the victims had received local treatment. One unfortunate parent, whose whole family of three boys had perished, told me he had applied salt herring outside the throat to blister it, and had greased the inside with a candle to "break the velum."

In the fall of the year the ship recrossed the Atlantic, and in the spring of 1893 brought out the first two nurses, Miss Cecilia Williams and Miss Ada Carwardine, both trained at the London Hospital, with two additional doctors. Miss Carwardine was landed on an island on the north side of the entrance to Belle Isle, called Caribou Island. Here a house had been obtained for a small hospital, and as many things as could be collected in so desolate a place enjoying such poor facilities for transportation. With the aid of these, to her lasting credit, Miss Carwardine equipped and carried on a small hospital until the approach of winter drove the staff from those inhospitable shores.

A small wood hospital in frame had been sent down to an island two hundred miles farther north at the entrance to Hamilton Inlet, and with the hospital a fair supply of material. Unfortunately, rough weather prevented the small mail steamer from landing the framework on the occasion of her first two visits. It therefore continued to cruise the coast until too late in the year to be ready for use. Nurse Williams therefore remained for the season on the ship. A small steam launch was also added this year to the strength of the Mission, and this has since been replaced by a larger one, while the sailing hospital ship has been itself replaced by a properly equipped hospital steamer of eighty-seven tons, carrying even a ten-inch X-ray apparatus. This was largely the gift of the High Commissioner of Canada, who had lived for many years on the Labrador coast. The ship was named the *Strathcona*.

The hospitals have gradually become, instead of mere appendages to

the ship, the mainstay of the work out here, and at the present moment a third and larger one is in process of erection on the north coast of Newfoundland close to the south side of the Straits of Belle Isle, while the capacity of each Labrador hospital has been nearly doubled by additions.

As a side issue to the main work a series of small coöperative stores have been started to assist in ameliorating the condition of trade by inaugurating a cash system, a universal and abominable "truck" system having hitherto blighted the coast. A small lumber-mill on a similar basis has also been started to assist in giving work in winter when the sea is frozen.

Returning to the subject of our paper, the work of the nurses, it is clear that one of the chief interests in this work from the point of view of the nurses consists in the variety of duties imposed upon them. A nurse is compelled to undertake duties which call out many faculties necessarily unused where supplies in emergencies can be obtained for money. Thus, when the hospital range unexpectedly failed at the northern hospital Nurse Williams had to cook for three months with the assistance of an iron pot for barking nets on a wood fire among the rocks outside the hospital, and had to keep a patient in a hot bath for three weeks, the water-supply being derived from a large tar-boiler borrowed for the purpose. There is a melancholy satisfaction, a selfish one, possibly, that the nurse shares with the doctor, in being the best of her kind available, seeing she is the only one for hundreds of miles—the only resource for skilled help for so many splendid specimens of the Anglo-Saxon race.

Again, *everything* one has really learned is realized as a valuable addition to one's stock in trade, and it is then one begins to appreciate the value of a thorough training and to be grateful for any opportunities of acquiring knowledge. Incidentally one learns often how ignorant one really is in practical matters. A knowledge of how to convert the only available, generally unorthodox, and often unpalatable article of diet into something calculated to tempt the jaded appetite, without injury to the constitution, of some sick man is a gift of Providence. Thus, in an epidemic of typhoid fever among our Esquimaux patients we were enabled to successfully diet them on seal-blubber. The nurse has also plenty of scope for genius in turning to account the crude material that the country provides for additions to her nursing staff. Nor is it an easy matter at first to order for twelve months ahead supplies for a hospital sufficient in quantity without waste on so strictly an economical basis as the available funds permit. For, in addition, the nurse must be able to afford to send away with many of our patients, who are so often terribly poor, both a stock of clothing and some form of nourishing and easily assimilated food.



THE NURSE RIDES IN A BOX LASHED ON THE KOMATIK. SOME HOSPITAL DOGS,
KITE AND ROVER



THE DOCTOR ON HIS ROUNDS. TWENTY MILES TO SEE A PATIENT. TEN TO TWENTY DOGS



THE SHORE HOSPITAL



THE DOCTOR ON HIS ROUNDS

At times, when severe operation cases have to be watched day and night, the doctor is called on to keep alternate vigils with the nurse. It is *then* a surgeon learns what modern, bold surgery means both to nurse and patient, and thinks twice before advising severe operations that do not offer materially compensatory benefits. My own first experience of a night-watch with a gastrostomy patient for carcinoma of the oesophagus made my previous respect for nurses amount almost to veneration, as the low moaning of the patient made the dismal hours of darkness in that lonely ward away in the bleak regions of the inhabited earth a very climax of gloom. One realizes then what the thing means,—the gentle hand, the quiet tread, the hushed room, the subdued light, the deft arrangements for warmth and pure air, the spotless cleanliness of the white linen, the knowing exactly what to do to best relieve the parched mouth and racked body, the little but invaluable adjuncts that modern science offers to suffering humanity. It has more than once been my lot, when travelling in winter between the small settlements, to appreciate the converse: to be called to operate single handed on a valuable life in a crowded hut, filled with noisy children, with only a wood screen that separates the tiny living-room, which serves the whole family for all purposes, from the still tinier one that serves them all for sleeping-quarters; where noise is ceaseless, ventilation impossible; where every amenity is unattainable; where the temperature must be either roasting or freezing; where the frowzy filth of the scanty, unwashed, much-patched bedcovering renders asepsis hopeless, and the solitary cracked basin and mean rag towel form the entire complement for all ablutions—which things serve as a subdivision for a sermon on the gospel of nursing. But even these grim deficiencies afford an occasional amusing aspect. Thus, on one occasion the weary surgeon, having decided it was safe to husband his energies by lying down during his watch by a patient whose breast had been removed for scirrhus cancer, attached a string to his big toe, leaving the other end around his patient's wrist with injunctions to pull if necessary. He had scarcely dozed off when he was startled by a violent traction, exerted by his not unmuscular patient. Hurrying to the bedside, he was informed, "I thought you would like to know I have had a good sleep, doctor." He would not tell us what he answered.

It was soon found impossible to close both Labrador hospitals in winter and leave the unfortunate residents, who were fast learning to appreciate the possibilities of skilled help, without a single resource during the many months they are cut off from the outside world by the sea of ice. So the southern hospital was stocked against winter. A doctor was left to travel the coast, and Nurse Carwardine to hold the hospital as a city of refuge for all comers. Though the nurse had fewer patients

during the winter, the actual tax on her capacities was much greater and thus made her work proportionately more enjoyable. She was not infrequently called on to exercise all the functions of the absent doctor.

Nine-years' experience has shown how well they have succeeded. Any possible monotony is relieved by occasional calls for her services at a distance from the hospital. She has then to trust herself to dog-team and komatik, over snow-covered hills and frozen arms of the sea, or to don snowshoes and fur robes and tramp through wood and dale to wherever she is needed. Thus, on one occasion Nurse Carwardine travelled as far as St. Paul's River and back on the Gulf of St. Lawrence, when diphtheria was raging. She covered a distance of two hundred miles. And the nurse should know how to handle a boat in summer as well as a dog-team in winter in Labrador.

Odd times are filled up in the mission-room with classes for all ages and sexes, for instruction in everything and anything, from the three R's through cooking and needlework to mothers' meetings and Sunday-school classes. By visiting from house to house she can do much to make life happier and brighter for those around her. Every year scattered friends have been good enough to remember these out-of-the-world people with discarded toys, books of all sorts, second-hand garments, and varieties of odds and ends, all of which find a place in a country like this. The oversight and distribution of these fall eagerly to the nurse. She thus mixes the functions of Doreas, Grace Darling, Miss Nightingale, and others. If ever there were an office of "Pooh Bah" occupied by a woman, it seems to me it must be that of hospital nurse to the Labrador Medical Mission.

HOW CHRISTMAS CAME TO THE WARD

By LAURA E. COLEMAN

Boston City Hospital

SHE was a little girl of eleven years, made far older, however, by contact with life and its hardships, but beneath all lay the hopes and fears of a little child, as yet an unproved dream.

Until after her serious operation she was very uncomfortable, so we were not at first surprised when the interest which always greeted our efforts at making our little patient comfortable and happy was not shown.

The only child in a ward of women, we hoped to find in her the necessary bit of sunshine which only the presence of a loving little child can lend to a ward; but despite our most earnest efforts to win a smile, her responses were monosyllabic and the tone more abrupt than polite.

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INTERIOR OF SHORE HOSPITAL